Substitute for form 1449/PTO				Complete if Known		
(Revised 07/	2007)			Application Number	09/980,376	
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	INFORMATION DISCLOSURE			First Named Inventor	Haumont et al.	
STATEMENT BY APPLICANT (Use as many sheets as necessary)				Art Unit	2617	
			)	Examiner Name	J. Ajayi	
Sheet	1	of	1	Attorney Docket Number	042933/373875	

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Examiner Initials*	Cite No.	<u>Document Number</u> Number - Kind Code (if known)		Publication Date MM-DD-YYYY		Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear	
		F	OR	REIGN PATI	ENT	DOCUMENTS		
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	OTHER DOCUMENTS					
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	English Language Translation Attached			
/ <b>JA</b> /	1	Search Report for PCT/EP00/04231 dated June 4, 1999.				
/J <b>A</b> /	2	International Preliminary Examination Report for PCT/EP00/04231 dated August 22, 2001.				

La. /Joel Alavi/	Date 12/17/2009 Considered
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<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.